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AF/2102

| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application No. | | 09/187,332 | | | |
|---|---------------------------------|--|--------------------------------------|------------|--|----------|--|
| | | Filing Date | November 6, 1998 ECEI Joe G. Naylor | | FD | | |
| | | First Named Inventor | | | | | |
| | | Art Unit | 214 | D04 | | | |
| | | | Examiner Name | Har | rell, Robert Pechnology Cen | er 2100 | |
| Total Number of F | on 49 | Attorney Docket Number | 296 | | | | |
| | ENCLO | SURES (chec | k all that apply) | | |] | |
| Fee Transmittal | Form . | Drawing(s) |) | | After Allowance Communication to Group | | |
| Fee Attack | ned | Licensing-r | elated Papers | | Appeal Communication to Board of Appeals and Interferences | | |
| Amendment / Re | sponse | Petition | | | | | |
| After Final Affidavits/declaration(s) | | Petition to Convert a Provisional Application | | | | | |
| Extension of Time Request | | Power of Attorney, Revocation Change of Correspondence Address | | | Status Letter | | |
| Express Abandonment Request | | Terminal Disclaimer | | | | | |
| Information Disclosure Statement | | Request for Refund | | | Return Receipt Postcard | · | |
| PTO/SB/08 Certified Copy of Priority | | CD, Number of CD(s) | | | | | |
| Certified Copy of Priority Document(s) | | | | | | | |
| Response to Missing Parts/ Incomplete Application | | | | | | | |
| Basic Filing Fee | | | RIEF (filed in Triplicate) | | | | |
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| Response Parts und 1.52 or 1.5 | e to Missing er 37 CFR 33 | | | | | | |
| | SIGNATUR | E OF APPLICA | NT, ATTORNEY, OR AG | ENT | | | |
| Firm Farzad E. Amini, Reg. No. 42,261 | | | | | | | |
| Individual name | | | | | | | |
| Signature | | | | | | | |
| Date March 26, 2004 | | | | | | | |
| | CERTIFI | CATE OF MAIL | ING/TRANSMISSION | | | , | |

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Appeal Brief-Patents, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date

March 26, 2004

Typed or printed name

Signature

| 3 0 2004 | | | | | | |
|---|-----------------------|------|----------------------|-------------------------------------|--|--|
| FF TRANSM | ΙΤΤΔΙ | | | Complete if Known | | |
| FEE TRANSM | | | Application Number | 09/187,332 | | |
| for FY 2004 | | | Filing Date | November 6, 1998 | | |
| Effective 10/01/2004. Patent fees are subject | t to annual revision. | | First Named Inventor | Joe G. Naylor | | |
| Applicant claims small entity status. | See 37 CFR 1.27. | | Examiner Name | Harrell, Robert B. | | |
| | (0) | | Art Unit | 2142 | | |
| TOTAL AMOUNT OF PAYMENT | (\$) 165 | 5.00 | Attorney Docket No. | 2964P012 R-C-V | | |
| METHOD OF PAYMENT (check | all that apply) | | FEE CA | ALCULATION (continued) A R 3 1 2004 | | |
| Money . | | 3. | ADDITIONAL FEES | , WAR 3 (700- | | |

| Check Credit card Order Other None Deposit Account Deposit Account Number 02-2666 | |
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| Deposit Account Deposit Account Deposit Deposit | |
| Deposit Account Number Deposit Deposi | |
| Deposit Account Number 02-2666 Code (\$) Code (\$) Fee Description 1051 130 2051 65 Surcharge - late filing fee or oath 1052 50 2052 25 Surcharge - late provisional filing fee or country specific pr | |
| Number 02-2666 1051 130 2051 65 Surcharge - late filing fee or oath Deposit 1062 50 2052 25 Surcharge - late provisional filing fee or | Fee Paid |
| Deposit 1052 50 2052 25 Surcharge - late provisional filing fee or | - recrasu |
| | |
| Name Blakely, Sokoloff, Laylor & Zarman LLP | |
| 2053 130 Non-English specification The Commissioner is authorized to: (check all that apply) 1812 2,520 For filling a request for ex parte reexamination | |
| Chame fee(s) indicated below PC Credit any overnayments 1804 920 * 1804 920 * Requesting publication of SIR prior to | |
| Charge any additional fee(s) or undergayment of fees as required under 37 | 1 |
| CFR §§ 1.16, 1.17, 1.18 and 1.20. 1805 1,840 1805 1,840 Requesting publication of SIR after | |
| Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account 1251 110 2251 55 Extension for reply within first month | |
| FEE CALCULATION 1252 420 2252 210 Extension for reply within second month | |
| 1. BASIC FILING FEE 1253 950 2253 475 Extension for reply within third month | |
| Large Entity Small Entity 1254 1,480 2254 740 Extension for reply within fourth month | |
| Fee Fee Fee Fee Description Fee Paid 1255 1,210 2255 606 Extension for reply within fifth month | |
| 1404 330 2401 165 Notice of Appeal | |
| 1001 770 2001 385 Utility filing fee 1402 330 2402 165 Filing a brief in support of an appeal | 165.00 |
| 1003 530 2003 265 Plant filing fee 1403 290 2403 145 Request for oral hearing | |
| 1004 770 2004 386 Reissue filing fee 1451 1,510 2451 1,510 Petition to institute a public use proceeding | |
| 1005 160 2005 80 Provisional filing fee 1452 110 2452 55 Petition to revive - unavoidable | |
| SUBTOTAL (1) (\$) 1453 1,330 2453 665 Petition to revive - unintentional | |
| 1501 1,330 2501 665 Utility issue fee (or reissue) | |
| 2. EXTRA CLAIM FEES Extra Fee from | |
| Claims below Fee Paid 1503 640 2503 320 Plant issue fee | |
| Independent 30 2450 130 Petitions to the Commissioner | |
| M. High Decorded | |
| Multiple Dependent = 1806 180 1806 Submission of Information Disclosure Stmt | |
| Large Entity Small Entity 8021 40 Recording each patent assignment per property (times number of properties) | 1 |
| Code (\$) Code (\$) | |
| 1202 18 2202 9 Claims in excess of 20 (37 ČFR § 1.129(a)) | |
| 1201 86 2201 43 Independent claims in excess of 3 1810 770 2810 385 For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 1203 290 2203 145 Multiple Dependent claim, if not paid | |
| 1204 86 2204 43 **Reissue independent claims over original patent 1802 900 1802 900 Request for expedited examination | |
| of a design application 1205 18 2205 9 **Reissue claims in excess of 20 and over | |
| original patent Other fee (specify) | |
| SUBTOTAL (2) (\$) 0.00 Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) | |
| **or number previously paid, if greater, For Reissues, see below **Or number previously paid, if greater, For Reissues, see below (\$) | 165.00 |
| | le) |

| SUBMITTED BY Complete (if applicable) | | | | | | |
|---------------------------------------|-----------------|--------------------------------------|--------|-----------|----------------|--|
| Name (Print/Type) | Farzad E. Amini | Registration No. (Attorney/Agent) | 42,261 | Telephone | (310) 207-3800 | |
| Signature | byteuns | | | Date | 03/26/04 | |